

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Obama for America**

**A. Full Name (Last, First, Middle Initial)**

**Peter J Langer**

Mailing Address 548 Huron Ave

City	State	Zip Code
Cambridge	MA	02138-4609

FEC ID number of contributing federal political committee.

C

Name of Employer  
UMass Boston

Occupation  
Educator

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : C14029639**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Amount of Each Receipt this Period

250.00

**B. Full Name (Last, First, Middle Initial)**

**Valerie Finch**

Mailing Address 3921 Grey Livery Way

City	State	Zip Code
Antelope	CA	95843

FEC ID number of contributing federal political committee.

C

Name of Employer  
Delta Airlines

Occupation  
Flight/Attendant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

**Transaction ID : C13691529**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		06		2012

Amount of Each Receipt this Period

25.00

**C. Full Name (Last, First, Middle Initial)**

**Michael Silverberg**

Mailing Address 8 White Rock Ter

City	State	Zip Code
Holmdel	NJ	07733-1645

FEC ID number of contributing federal political committee.

C

Name of Employer  
Atlantic Ambulatory Anesthesia

Occupation  
Anesthesiologist

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : C13930209**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		21		2012

Amount of Each Receipt this Period

100.00

**Subtotal Of Receipts This Page (optional)**.....

375.00

**Total This Period (last page this line number only)**.....